

# Request to Engage Facilities at Ash Lawn-Highland

*Please fill out this form as completely as possible and submit it with your checks. We understand that some details, especially equipment desired and choice of caterer, will not be known at this time. Just fill in what you can now, and then call to confirm the specifics at least ten days before your event. Additional charges may apply for use of some spaces.*

The undersigned wishes to engage facilities for \_\_\_\_\_ (name of event) on \_\_\_\_\_ (date) beginning at \_\_\_\_\_ (time) and ending at \_\_\_\_\_ (time) for approximately \_\_\_\_\_ persons.

Contact person: \_\_\_\_\_ Day phone: \_\_\_\_\_ Eve. phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Email: \_\_\_\_\_

## FACILITIES REQUESTED:

- \_\_\_\_\_ Hilltop Pavilion (with serving kitchen, bride's room and band dressing room)
- \_\_\_\_\_ Barn Site Pavilion (includes use of Conference Room)
- \_\_\_\_\_ Conference Room (with kitchen, patio and restroom facilities)
- \_\_\_\_\_ Monroe Home open-house visit, up to one hour after regular closing time.

## GARDEN AREAS REQUESTED:

- \_\_\_\_\_ Johns Garden
- \_\_\_\_\_ Peacock Yard
- \_\_\_\_\_ Theater Yard
- \_\_\_\_\_ Oak Tree Yard
- \_\_\_\_\_ Blue Ridge Yard
- \_\_\_\_\_ Kitchen/Service Yard (after 6pm)
- \_\_\_\_\_ Hilltop Pavilion Yard
- \_\_\_\_\_ Overlook Platform

## EQUIPMENT REQUESTED:

- \_\_\_\_\_ 60-inch round tables (39)
- \_\_\_\_\_ 48-inch round tables (7)
- \_\_\_\_\_ 8-foot x 36-inch tables (22)
- \_\_\_\_\_ 8-foot x 30-inch tables (6)
- \_\_\_\_\_ 6-foot long tables (2)
- \_\_\_\_\_ chairs (278)
- \_\_\_\_\_ garden arch

## FOR WEDDINGS ONLY:

\_\_\_\_\_  
Bride's name

\_\_\_\_\_  
Groom's name

\_\_\_\_\_  
Bride or groom's current address:

A brief description of the event: \_\_\_\_\_

Caterer: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact person: \_\_\_\_\_

**The undersigned has read the Ash Lawn-Highland Rental Guidelines and is authorized to execute this request.**

\_\_\_\_\_  
Name of Renter or Agent (with middle initial)

\_\_\_\_\_  
Organization (if any)

\_\_\_\_\_  
Renters' SS#\*\*

\_\_\_\_\_  
Renter's Telephone (day)

\_\_\_\_\_  
Renter's Street Address

\_\_\_\_\_  
Renter's Telephone (evening)

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Renter's Email Address

\_\_\_\_\_  
Signature of Renter or Agent

\_\_\_\_\_  
Date

\*\*Please provide the SSN of whomever is writing the check for the event. It is needed to process the security deposit refund.